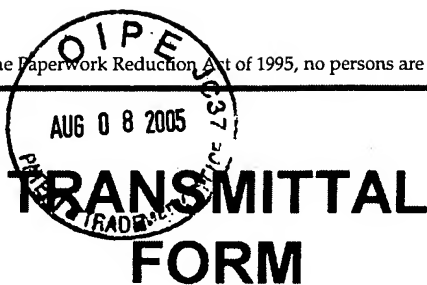


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(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/656,916	
	Filing Date	September 4, 2003	
	First Named Inventor	Mihai Buretea	
	Group Art Unit	1774	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	28	Attorney Docket Number	40-000810US

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> Amendment and Request for Reconsideration <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> PTO-1449 form <input checked="" type="checkbox"/> Copy of reference cited <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): receipt acknowledgment postcard
<b>Authorization to Charge Deposit Account</b> Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.		
Remarks		

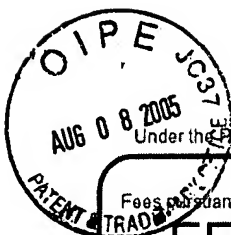
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jonathan Alan Quine, J.D., Ph.D., Reg No. 41,261, For Monica Elrod-Erickson, Reg. No. 51,651, Quine Intellectual Property Law Group P.C.
Signature	<i>Jonathan Alan Quine</i>
Date	August 3, 2005

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO via fax no. 703-306-5995 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Deborah Berwick		
Signature	<i>Deborah Berwick</i>	Date	August 3, 2005



Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
For FY 2005☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known

Application Number	10/656,916
Filing Date	September 4, 2003
First Named Inventor	Mihai Buretea
Examiner Name	Eric K. Wong
Art Unit	1774
Attorney Docket No.	40-000810US

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☒ Other (please identify): Deposit Account☒ Deposit Account Deposit Account Number: 50-0893 Deposit Account Name: Quine Intellectual Property Law Group, P.C.

For the above identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims \_\_\_\_\_ Extra Claims \_\_\_\_\_ Fee (\$) \_\_\_\_\_ Fee Paid (\$) \_\_\_\_\_

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims \_\_\_\_\_ Extra Claims \_\_\_\_\_ Fee (\$) \_\_\_\_\_ Fee Paid (\$) \_\_\_\_\_

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 27 CFR 1.16(s).

Total Sheets \_\_\_\_\_ Extra Sheets \_\_\_\_\_ Number of each additional 50 or fraction thereof \_\_\_\_\_ (\$) \_\_\_\_\_ Fee Paid (\$) \_\_\_\_\_  
\_\_\_\_\_ - 100 \_\_\_\_\_ /50 = \_\_\_\_\_ Round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$) \_\_\_\_\_

Other (e.g., late filing surcharge): \_\_\_\_\_

Other: Submission of Information Disclosure Statement 180.00

Other: \_\_\_\_\_

Other: \_\_\_\_\_

Other: \_\_\_\_\_

Other: \_\_\_\_\_

Other: \_\_\_\_\_

## SUBMITTED BY

Signature	<u>Jonathan Alan Quine</u>	Registration No. 41,261 (Attorney/Agent)	Telephone
Name (Print/Type)	Jonathan Alan Quine, J.D., Ph.D., Reg No. 41,261, For Monica Elrod-Erickson	Date	August 4 2005